

UNITED STATES BANKRUPTCY COURT Southern District of New York						VOLUNTARY PETITION												
Name of Debtor (if individual, enter Last, First, Middle): Ward Street Associates, LLC			Name of Joint Debtor (Spouse) (Last, First, Middle):															
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):															
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): 56-2423319			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):															
Street Address of Debtor (No. and Street, City, and State): 40 Guinea Road Brewster NY			Street Address of Joint Debtor (No. and Street, City, and State): 40 Guinea Road Brewster NY															
ZIP CODE 0509			ZIP CODE															
County of Residence or of the Principal Place of Business: Putney			County of Residence or of the Principal Place of Business:															
Mailing Address of Debtor (if different from street address): 40 Guinea Road Brewster NY			Mailing Address of Joint Debtor (if different from street address):															
ZIP CODE 0509			ZIP CODE															
Location of Principal Assets of Business Debtor (if different from street address above): 1024 Ward Street, Chester PA			ZIP CODE 9013															
Type of Debtor (Form of Organization) (Check one box.)		Nature of Business (Check one box.)			Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)													
<input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) <hr/>		<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other Real Estate Holding <hr/> Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding													
Filing Fee (Check one box.)		Nature of Debts (Check one box.)			Chapter 11 Debtors													
<input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).			Check one box: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>). Check if: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).													
Statistical/Administrative Information																		
<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																		
Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1-49</td> <td style="width: 10%;">50-99</td> <td style="width: 10%;">100-199</td> <td style="width: 10%;">200-999</td> <td style="width: 10%;">1,000-5,000</td> <td style="width: 10%;">5,001-10,000</td> <td style="width: 10%;">10,001-25,000</td> <td style="width: 10%;">25,001-50,000</td> <td style="width: 10%;">50,001-100,000</td> <td style="width: 10%;">Over 100,000</td> </tr> </table>									1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000									
Estimated Assets <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">\$0 to \$50,001 to \$100,000</td> <td style="width: 10%;">\$50,001 to \$100,000</td> <td style="width: 10%;">\$100,001 to \$500,000</td> <td style="width: 10%;">\$500,001 to \$1 million</td> <td style="width: 10%;">\$1,000,001 to \$10 million</td> <td style="width: 10%;">\$10,000,001 to \$50 million</td> <td style="width: 10%;">\$50,000,001 to \$100 million</td> <td style="width: 10%;">\$100,000,001 to \$500 million</td> <td style="width: 10%;">\$500,000,001 to \$1 billion</td> <td style="width: 10%;">More than \$1 billion</td> </tr> </table>									\$0 to \$50,001 to \$100,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
\$0 to \$50,001 to \$100,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion									
Estimated Liabilities <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">\$0 to \$50,001 to \$100,000</td> <td style="width: 10%;">\$50,001 to \$100,000</td> <td style="width: 10%;">\$100,001 to \$500,000</td> <td style="width: 10%;">\$500,001 to \$1 million</td> <td style="width: 10%;">\$1,000,001 to \$10 million</td> <td style="width: 10%;">\$10,000,001 to \$50 million</td> <td style="width: 10%;">\$50,000,001 to \$100 million</td> <td style="width: 10%;">\$100,000,001 to \$500 million</td> <td style="width: 10%;">\$500,000,001 to \$1 billion</td> <td style="width: 10%;">More than \$1 billion</td> </tr> </table>									\$0 to \$50,001 to \$100,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
\$0 to \$50,001 to \$100,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion									
P C G H E P S 200 AUG 19 12: 28 THIS SPACE IS FOR COURT USE ONLY FILED BANKRUPTCY COURT																		

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Ward Street Associates, LLC	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: Southern District of NY	Case Number: 09-35974	Date Filed: 04/20/2009	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor:	Case Number:	Date Filed:	
District: Southern District of New York <input checked="" type="checkbox"/>	Relationship:	Judge:	
Exhibit A		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.)	
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.	<input checked="" type="checkbox"/> _____ Signature of Attorney for Debtor(s) (Date)		
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
(Name of landlord that obtained judgment)			
(Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Ward Street Associates, LLC
Signatures		
Signature(s) of Debtor(s) (Individual/Joint) <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>Telephone Number (if not represented by attorney) _____</p> <p>Date _____</p>		Signature of a Foreign Representative <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>
Signature of Attorney* <p>X _____ Signature of Attorney for Debtor(s)</p> <p>Printed Name of Attorney for Debtor(s) _____</p> <p>Firm Name _____</p> <p>Address _____</p> <p>Telephone Number _____</p> <p>Date _____</p> <p>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</p>		Signature of Non-Attorney Bankruptcy Petition Preparer <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>X _____ Address</p> <p>X _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</p>
Signature of Debtor (Corporation/Partnership) <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual <i>Frank D. St. John</i></p> <p>Printed Name of Authorized Individual _____ <i>Frank D. St. John</i></p> <p>Title of Authorized Individual _____ <i>8/19/10</i></p> <p>Date _____</p>		

In re Ward Street Associates, LLC
Debtor(s)

Case No. _____

(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has which the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor". Include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number <i>(See Instructions Above.)</i>	Co-Debtor	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Contingent	Unliquidated	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if Any
			H--Husband	W--Wife	J--Joint	C--Community
Account No: 0125		Mortgage 215. 665. 8700		X	\$ 6,274,461.95	\$ 0.
Creditor # : 1 Imperial Capital Bank Ingersoll & Rooney 1835 Market St, 14th Floor Philadelphia PA 19103-2985		Value: \$ 10,000,000.00				
Account No:		917. 971. 6387		X	\$ 375,000.00	\$ 375,000.
Creditor # : 2 JR Factors 188 E 64th St New York NY 10065		Value: \$ 0.00				
Account No:						
		Value:				

No continuation sheets attached

Subtotal \$ (Total of this page)	\$ 6,649,461.95	\$ 375,000.
Total \$ (Use only on last page)	\$ 6,649,461.95	\$ 375,000.

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of

In re Ward Street Associates, LLC,
Debtor(s)

Case No. _____

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet: **Taxes and Certain Other Debts Owed to Governmental Units**

Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See Instructions above.)	CoDebtors	Date Claim was Incurred and Consideration for Claim	Contingent	Unliquidated	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
			H--Husband	W--Wife	J--Joint	C--Community	
Account No: 3-90 Creditor # : 1 Chester Upland School District Treasurer's Office 1 Fourth Street Chester PA 19013		610. 447. 7700			\$134,115.30	\$134,115.30	\$ 0
Account No: 3-90 Creditor # : 2 City of Chester City Hall 1 Fourth Street Chester PA 19013		610. 447. 7700			\$ 70,756.00	\$ 70,756.00	\$ 0
Account No: 3-90 Creditor # : 3 Delaware County, PA Treasurer of Delaware County P.O. Box 1886 201 W. Front St. Media PA 19063		610. 891. 4278			\$ 13,978.00	\$ 13,978.00	\$ 0
Account No: 2-23 Creditor # : 4 PA Department of Revenue Bureau of Individual Taxes P.O. Box 280603 Harrisburg PA 17128			X		\$ 94,458.23	\$ 94,458.23	\$ 0
Account No:							
Account No:							
Sheet No. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims			Subtotal \$ (Total of this page)		<u>313,307.53</u>	<u>313,307.53</u>	<u>0</u>
			Total \$ (Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)		<u>313,307.53</u>		
			Total \$ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)			<u>313,307.53</u>	<u>0</u>

In re Ward Street Associates, LLC
Debtor(s)

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address Including Zip Code, And Account Number (See Instructions above.)	Co-Debtor <input type="checkbox"/> H--Husband <input type="checkbox"/> W--Wife <input type="checkbox"/> J--Joint <input type="checkbox"/> C--Community	Date Claim was incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:						\$ 18,204.
Creditor # : 17 Rosel Agency, Inc. Robert Pardella, Esq. 33 Walt Whitman Rd, Ste 310 Huntington Station NY 11746		631. 424. 0747				
Account No: 780A						\$ 203.
Creditor # : 18 Royal Chemical Corp PO Box 1601 Owings Mills MD 21117 148 Chartley Drive Reisterstown, MD 21136		410. 833. 2827				
Account No:						
Account No:						
Account No:						
Account No:						

Sheet No. 3 of 3 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$	\$ 18,408.
Total \$	\$ 199,851.

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules
and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re Ward Street Associates, LLC
Debtor(s)

Case No. _____

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See Instructions above.)	Co-Debtor	Date Claim was incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 6903 Creditor #: 11 National Tenant Network NTN-Philadelphia PO Box 10223 Suite L2 Blackwood NJ 08012 188 Franklin Rd.		H-Husband W-Wife J-Joint C-Community	\$56,629.5800			\$ 56.
Account No: Creditor #: 12 NYS Assessment Receivables PO Box 4127 Binghamton NY 13902-4127 NY State Assessment Albany NY 12240			651-365-5060			\$ 208.
Account No: 4837 Creditor #: 13 Paychex Commercial Recovery Dept 9298 Central Ave NE, Ste 310 Minneapolis MN 55434						\$ 3,263.
Account No: 0100 Creditor #: 14 Peco PO Box 37629 Philadelphia PA 19101 33rd & Market Street			651-365-5060			\$ 1,706.
Account No: 0006 Creditor #: 15 Peco PO Box 1349 25th & Market Street Philadelphia PA 19101			651-365-5060			\$ 1,115.
Account No: 22-9 Creditor #: 16 Pennsylvania Labor & Industry Office of Unemployment PO Box 60048 Harrisburg PA 17106		Field Accounting Services 2nd Floor, Suite D 101 701 Crosby Street Chester, PA 19013 610. 447. 3290				\$ 4,118.

Sheet No. 2 of 3 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 10,467.

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re Ward Street Associates, LLC
Debtor(s)

Case No. _____

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor <input type="checkbox"/> H-Husband <input type="checkbox"/> W-Wife <input type="checkbox"/> J-Joint <input type="checkbox"/> C-Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:				X		\$ 81,239.
Creditor # : 5 Delcora PO Box-999 Chester PA 19016		6/1/2008 6/1/2008				
Account No: 8362		8725 West Sahara Blvd. Zone 1135 Las Vegas NV 89117 866.875.5488				\$ 8,719.
Creditor # : 6 Home Depot Credit Services PO Box-6926 The Lakes NV 88901						
Account No: 7225		8725 West Sahara Blvd. Zone 1135 Las Vegas NV 89117 866.875.5488				\$ 2,715.
Creditor # : 7 Home Depot Credit Services PO Box-6926 The Lakes NV 88901						
Account No:						\$ 25,693.
Creditor # : 8 IH Development Corp 9 Iroquois Rd Ossining NY 10562		6/1/2008 6/1/2008				
Account No:						\$ 9,227.
Creditor # : 9 JBH Architectural Design PLLC 1A Croton Dam Rd Ossining NY 10562		6/1/2008 6/1/2008				
Account No: -17H				X		\$ 4,783.
Creditor # : 10 Michael F.X. Gillen & Assocs. 230 N Monroe St Media PA 19063						

Sheet No. 1 of 3 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 132,378.

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules
and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re Nard Street Associates, LLC
Debtor(s)

Case No. _____

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without pri-
against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has &
the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's init
and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See
U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continua
sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated" the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number <i>(See Instructions above.)</i>	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 7553 Creditor # : 1 <i>Building Supply Company</i> <i>Matthews, Pierce & Lloyd, Inc.</i> <i>830 Walker Rd, Ste 12</i> <i>Dover DE 19904</i>		H-Husband W-Wife J-Joint C-Community				\$ 16,771.
Account No: Creditor # : 2 <i>Chester Water Authority</i> <i>415 Welsh St</i> <i>Chester PA 19013-4519</i>		302-678-9225				\$ 21,168.
Account No: 05-4 Creditor # : 3 <i>Comcast</i> <i>PO-Box-3005</i> <i>Southeastern PA 19398</i> <i>160 N. Gulf Road</i> <i>Media PA 19063</i>		800-266-2278				\$ 206.
Account No: Creditor # : 4 <i>Delaware County Solid Waste</i> <i>1521 N Providence Rd</i> <i>Media PA 19063</i>		610-644-2022				\$ 450.
3 continuation sheets attached						Subtotal \$
						Total \$
						\$ 38,596.

(Use only on last page of this completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)